

|   |  |       |            |        |       |
|---|--|-------|------------|--------|-------|
| 1.) CORPORATION NAME:<br><b>Massaro Industries, Inc.</b>  | DUE DATE: <b>6/30/2014</b>   |       |            |        |       |
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CORPORATION SERVICE COMPANY<br/>Bank of America Center, 16th Floor<br/>1111 East Main Street</b> | SCC ID NO: <b>F1654286</b>   |       |            |        |       |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>RICHMOND, VA</b>  | 5.) STOCK INFORMATION  |       |            |        |       |
| 4.) STATE OR COUNTRY OF INCORPORATION:<br><b>PA</b>   | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 1,000 |
| CLASS   | AUTHORIZED   |       |            |        |       |
| COMMON  | 1,000  |       |            |        |       |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 91 PENNSYLVANIA AVE

CITY/ST/ZIP: OAKMONT, PA 15139

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

|                                   |   |                                   |
|-----------------------------------|---|-----------------------------------|
| NAME: JAMES P MASSARO             | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: PRESIDENT                  |   |                                   |
| ADDRESS: 91 PENNSYLVANIA AVE      |   |                                   |
| CITY/ST/ZIP/CO: OAKMONT, PA 15139 |   |                                   |

|                                   |   |                                   |
|-----------------------------------|---|-----------------------------------|
| NAME: KAREN J ZAVACKY             | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: SECRETARY                  |   |                                   |
| ADDRESS: 91 PENNSYLVANIA AVE      |   |                                   |
| CITY/ST/ZIP/CO: OAKMONT, PA 15139 |   |                                   |

|                                   |                                  |  |
|-----------------------------------|----------------------------------|--|
| NAME: EUGENE J MASSARO            | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: DIRECTOR                   |                                  |  |
| ADDRESS: 91 PENNA AVE             |                                  |  |
| CITY/ST/ZIP/CO: OAKMONT, PA 15139 |                                  |  |

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

|   |                                  |           |
|---|----------------------------------|-----------|
| /s/ JAMES P MASSARO                                 | JAMES P MASSARO, PRESIDENT       | 4/24/2014 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE      |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.